

Editorial

Mysterious Pisotriquetral Joint

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In clinical wrist surgery, one of the most difficult disorders of the wrist is the “pisotriquetral (PT) joint arthrosis.” Because the pisiformis is the sesamoid bone inside the flexor carpi ulnaris (FCU) tendon, the PT joint arthrosis may be related with pathology of the FCU tendon overload. The pisiformis or the PT joint functions as a fulcrum during wrist flexion. The pisiformis also connects with the triquetrum, a keynote intercalated bone in the proximal carpal row that has a tendency of flexing when the scapholunate or lunotriquetral ligament ruptures or scaphoid bone is fractured. Enormous force from the FCU tendon is considered as one of the flexion mechanics of the triquetrum. However, the function and kinematics of the pisiformis or

PT joint are not fully revealed yet. Treatment options of the PT arthrosis also vary, for example, resection of the pisiformis, fusion of the PT joint, or interposition arthroplasty. This issue includes the “Special Review” entitled “Treatment of Pisotriquetral Arthritis by Pyrocarbon Interposition Arthroplasty” by Dr. Bellemere that describes the unique technique of pyrocarbon implant interposition arthroplasty and its excellent clinical outcomes.

Interesting scientific articles on wrist fractures such as the combined fractures of scaphoid and distal radius, plate treatment of scaphoid nonunion, triangular fibrocartilage complex, proximal row carpectomy, and also unique case reports and procedure are included in this issue. Don't miss it.

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